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Bib Data Sheet

CONFIRMATION NO. 2861

SERIAL NUMBER 10/708,862	FILING DATE 03/29/2004  RULE	CLASS 137	GROUP ART UNIT 3753	ATTORNEY DOCKET NO. 1320.10
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
*None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 UNITED KINGDOM GB/0123340.2 09/28/2001  
 UNITED KINGDOM GB/0129813.2 12/13/2001 *not received*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 05/20/2004

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>CR</i>	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 9	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 2
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ADDRESS  
 21901  
 SMITH & HOPEN PA  
 180 PINE AVENUE NORTH  
 OLDSMAR, FL  
 34677

TITLE  
 Fluid Delivery System

FILING FEE  RECEIVED 595	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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